



**Indiana  
Professional  
Licensing  
Agency**

**Home Inspectors Licensing Board**  
402 West Washington Street, Room W072  
Indianapolis, Indiana 46204  
Phone: (317) 234-3009  
Website: PLA.IN.gov

Michael R. Pence, Governor

Nicholas W. Rhoad, Executive Director

## Application for Renewal of Home Inspector License

Your license as a home inspector in the state of Indiana expires on October 1, 2013. To renew your license, please complete this form in its entirety and submit it with the renewal fee of \$400.00 to our office with a postmark date of NO LATER THAN OCTOBER 1, 2013. Include a \$50 late fee if postmarked after October 1, 2013. You may also renew online at [www.pla.in.gov](http://www.pla.in.gov).

### FOR OFFICE USE ONLY

Renewal Fee	Receipt No.	Date
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### APPLICANT INFORMATION

Last Name	First Name	License Number
Street Address		
City	State	Zip Code
Phone Number	Email Address	

### QUESTIONS

1. Since you last renewed, has any professional license, certificate, registration or permit you hold or have held been disciplined or are formal charges pending?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
2. Since you last renewed, have you been denied a license, certificate, registration, or permit in any state?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
3. Since you last renewed, and except for minor violations of traffic laws resulting in fines and arrests or convictions that have been expunged by a court, have you been arrested, entered into a diversion agreement, been convicted of, pled guilty to, or pled nolo contendere to any offense, misdemeanor, or felony in any state?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
4. Do you currently hold general liability coverage of at least \$100,000 as required by IC 25-20.2-5-2?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
5. Have you completed the required continuing education hours as outlined in 876 IAC 1-5-1 (32 hours)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

### LICENSEE AFFIRMATION

By signing below, I hereby attest that the information listed on this renewal application is true, complete and correct.	
Signature of Licensee	Date (month, day, year)